



**APPEAL OF A DETERMINATION
OF AN ADMINISTRATIVE OFFICIAL OR THE
RESPONSIBLE CITY OFFICIAL**

TO: THE CITY OF DES MOINES HEARING EXAMINER:

COMES NOW _____ on this _____ day of _____,
(your name)
_____ as an APPELLANT in the matter of the decision by an Administrative Official, namely
the Director of _____
(appropriate department)
or decision of the Responsible Official to:

WHEREAS, _____, the Administrative Official or the Responsible Official, after duly
considering this matter, did on _____, _____, take said action;

THEREFORE BE IT KNOWN that the APPELLANT, after review and consideration of the reasons given
by the Administrative Official or the Responsible Official for the action, does now, under the provision of
the appropriate official regulations, give written notice of APPEAL to the Hearing Examiner of said
decision and alleges the following errors of the Administrative Official or Responsible Official:

(If more space is needed, please attach additional sheets)

FURTHERMORE, the APPELLANT requests that the Hearing Examiner, upon review of the decision of
the Administrative Official or Responsible Official, find in favor of the APPELLANT and revise
the action of the Administrative Official or Responsible Official by

Signature of Appellant Phone

Address of Appellant
Filed with the Public Works Department this _____ day of _____,
By _____; Received by _____;
Forwarded to the Hearing Examiner on _____, _____.